Surgeon General's Conference on Agricultural Safety and Health FARMSAFE 2000 • A National Coalition for Local Action Convened by the National Institute for Occupational Safety and Health April 30 - May 3. 1991. Des Moines, lowa

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#### WELCOME FROM THE CHAIR OF THE CONFERENCE

By J. Donald Millar, M.D.

Director, National Institute for Occupational Safety and Health
Assistant Surgeon General of the United States Public Health Service

I am very delighted and proud to welcome you to this Surgeon General's Conference on Agricultural Safety and Health. The nickname is "FarmSafe 2000," and the theme is "a national coalition for local action."

Now all of this is by way of saying that everybody here is interested in preventing the unnecessary wastage of life, limb, and health that is associated with the oldest and noblest occupation—agriculture. Beyond that common interest, we are a very diverse group.

I would wager that some of you never heard, for instance, of NIOSH, the National Institute for Occupational Safety and Health, before this meeting. That is not unexpected, because most of the professional life of NIOSH has been devoted to the problems of smokestack industries—manufacturing, mining, and other occupations—but that is very rapidly changing in this rapidly changing world of ours.

We were created by the Occupational Safety and Health Act of 1970, which sought to "assure safe and healthful working conditions for every working man and woman." So we are obliged at this point in our national history to turn our attention to all problems that create unsafe and unhealthful working conditions for men and women.

That Act created two organizations you may have heard of OSHA and NIOSH;

both are quite different organizations; both are in different parts of the Federal Government, and you will hear from leaders of both during this week.

OSHA is located in the Department of Labor and has responsibility, among other things, for promulgating and enforcing occupational standards.

NIOSH is in the Public Health Service, the Department of Health and Human Services, and is expected to exercise scientific leadership in this field. So we are expected to produce and disseminate scientific information that enables the prevention of occupational diseases and injuries.

Among the things we do best is to convene people, such as at this conference, to bring people together so that they are able to share with each other useful scientific information, which can permit the practice of prevention in every setting where it can be done. So we were very eager when the Surgeon General called on us to sponsor this conference—the first of its kind in agricultural safely and health that has ever been convened.

Dr. J. Donald Millar: And now it is my distinct pleasure to introduce the convener of this Conference, the Surgeon General of the United States Public Health Service. She is the first woman and the first Puerto Rican to hold the position of Surgeon General. She is a dynamic and vivacious leader in the war against death and disease. I give you the fourteenth Surgeon General of the United States, Dr. Antonia C. Novello:

Surgeon General's Conference on Agricultural Safety and Health FARKSAFE 2000 • A National Coalition for Local Action Convened by the National Institute for Occupational Safety and Health April 30 – May 3, 1991, Des Moines, Iowa

## WELCOME TO DES MOINES, IOWA

By John P. Dorrian Mayor, City of Des Moines

Dr. Antonia C. Novelio: Thank you Dr. Millar. Ladies and Gentlemen—I welcome you to the Surgeon General's Conference on Agricultural Safety and Health, the tenth Surgeon General's Conference on Occupational Health, and the first one in 50 years. The last one was convened in 1941, but I will speak further on that history later. I would now like to introduce Mr. Dorrian, the mayor of Des Moines, Iowa. It is a great pleasure for me to be able to introduce him. He is a lifelong resident of Des Moines, and he has served in the city government since 1983. Following service as mayor pro tem, he was elected mayor in 1987. We also know that he currently serves as the Executive Director of the Central Iowa Building Trades. Among his many public service activities, he currently serves on the Governor's Committee of Partnership for Economic Progress. Ladies and Gentleman, I would like to welcome Mr. Dorrian:

Thank you very much. On behalf of myself and all the other members of the Des Moines City Council, I want to welcome you to the City of Des Moines, and a very special welcome to Dr. Novello. Thank you for that nice introduction.

We are extremely proud of our city, and we hope that if it is your first visit to Des Moines you will be pleasantly surprised. If it has been awhile since you have been to the City of Des Moines, then you have seen some good changes take place.

We are the capital city of the State of Iowa, and as the stewards of the capital city, we try to prepare the city well for everyone's visit. We have spent a lot of dollars on the Skywalk System, for example. The weather is pretty good today, but there are days when people really appreciate that Skywalk System. Several miles of it now exist, and it is very expensive to erect, but there is a purpose in mind.

Sometimes it snows in Iowa, and sometimes it gets extremely warm with a little bit of humidity. So we need our Skywalk System. We have a lot of neat things that we hope

you are able to take in while you are here. We even have a horse track running out there; I do not know if any of you are familiar with that or not, but for every dollar that is bet out there my property taxes may not go up—if you have it in your heart to support the horse racing. I have not been out there myself much, but we have a lot of other neat things—the botanical center and the zoo, the libraries, the Governor's Mansion and the Capital Building.

We just have a lot of attractions. We like to keep all these things going, and that is where you can help, if you would have it in your heart to do so. We hope that you will find a place to spend a dollar or two while you are here in our city. But really, we do hope that you have a good conference. I have to apologize because I have to leave. We do hope that you have a good conference, and again, a very special welcome to you to the capital city of Des Moines, Iowa. We are extremely proud to have all of you with us.

We do hope that you have a good conference. Enjoy yourself and come back often. Thank you.

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#### WELCOME TO IOWA

By Christopher G. Atchison
Director, Iowa Department of Public Health

Dr. Antonia C. Novello: Governor Branstad was unable to attend the conference today. So, I would like to introduce Christopher G. Atchison, the Assistant Director of the Illinois Department of Public Health, who is here to speak in his behalf. Mr. Atchison has served as the Assistant Director of the Illinois Department of Health since 1987. As Assistant Director, he has been responsible for program development, legislative action and executive implementation of agency programs. He has also served as a chair of the Governor's Interagency AIDS Task Force and was involved in the establishment of the Center for Rural Health. In addition, as a member of the Illinois Public Health Association, he recently worked on a task force to restructure public health in Illinois according to the future of public health reported by the Institute of Medicine. Mr. Atchison has just been appointed as director of the Iowa Department of Public Health and his welcome to us today marks his maiden speech to this state. Please welcome Mr. Atchison:

Thank you, Dr. Novello. Before I officially welcome you on behalf of Governor Branstad to Iowa, I want to acknowledge the work that Dr. J. Donald Millar, who opened this conference and is the Assistant Surgeon General and Chair of this conference, put into organizing this great event. On behalf of the people of Iowa, we thank you for bringing this conference here.

Mayor Dorrian has already welcomed you to Des Moines. On behalf of Governor Terry Branstad and the Iowa Department of Public Health, I want to welcome you to Iowa and to the Surgeon General's Conference on Agricultural Safety and Health.

We, of course, believe it is quite appropriate for this conference to be held in Iowa, a leading agricultural state. Each year Iowa farmers produce more than \$9 billion in crops and livestock. Twenty-five percent of America's pork and eight percent of the nation's grain-fed beef are raised in Iowa. Among the states, Iowa ranks second in the value of agricultural exports, and in 1988, Iowa ranked first in the nation in the production of red meat.

I am pleased to welcome such a broadbased group of individuals to this conference. Represented here today are individuals from 40 states and several foreign countries, evidence that agricultural safety and health is an issue that is not only national but international in scope. Your attendance here demonstrates your commitment to agricultural safety and health.

Though everyone here today may know that agriculture is one of the most hazardous occupations there is, according to the Year 2000 Health Status Objectives, farmworkers suffered 14 injuries per 100,000 during the years 1983 through 1987. The national goal would be 6 in all occupations. So, you can see agricultural injuries are high even in the statistics that we know.

The health objectives further state that agricultural worker deaths may be underestimated because many farm work forces have fewer than 11 workers and are, therefore, not identified by national data systems. The National Safety Council has estimated a rate as high as 52.1 deaths per 100,000 agricultural workers.

Until now, the hazards have been undercounted and largely ignored and underfunded, but that is changing as we can see when we look at the stated purposes of this conference—to raise consciousness, build coalitions, disseminate information, and encourage action to prevent injury and disease related to agriculture—certainly all very worthwhile goals.

Nationally, we are beginning to develop surveillance systems that document the kinds of injuries that are occurring and where they are occurring—efforts that are just beginning to develop interventions and strategies, which will help prevent those injuries and fatalities.

In Iowa, we recently finished the first year of a surveillance program to collect information about agricultural injuries and fatalities, the Sentinel Project Researching Agricultural Injury Notification Systems, which we simplified to called SPRAINS. SPRAINS is the only statewide surveillance program currently in existence, and we have been astounded by some of the figures we have gathered.

We know that there are currently about 116,000 full- and part-time agricultural workers in the state; and there were over 2,000 injuries and over 83 fatalities recorded in 1990. Eleven of these fatalities were children under the age of 15. Of the total fatalities, 51 percent were in the less-than-20-year-old age group and the over-65 age group.

In any other occupation, these people would not be working. However, in agriculture-related occupations, workers span the ages from childhood to the senior years; and apparently young workers and seniors are most vulnerable to fatal injuries.

We must note, because farming has traditionally been a family business, that it is not just the professional farmer, it is the farm family that is at risk for injury. Our statistics show that 70 percent of all injuries are suffered by farm family members—spouses, children, grandpas and grandmas helping out.

The major causes or vectors of injury fall into three groups. Number one is machinery. Number two is animal-related. Number three is falls and slips. Where do the injuries occur? Everywhere from the barn to the pasture. At least in Iowa, no clear pattern has emerged.

Iowa is developing interventions and strategies by building broadbased collaborative efforts. Among the organizations involved in these collaborative ventures are State government, academia, farm organizations, and community-based organizations.

The Governor has appointed a task force to look at our health and safety objectives for the year 2000. The purpose of this task force is to adopt objectives and measures that will guide the planning and allocation of resources throughout the decade, resulting in:

- 1. Increasing the span of life in Iowa.
- 2. Reducing health disparities among Iowans.
- 3. Achieving access to prevention services for all Iowans by the year 2000.

Recently I had the pleasure of meeting with Dr. Richard Remington, who chaired the Institute of Medicine's commission on the future of public health, and the Governor has appointed him the chair of our Year 2000 effort. Dr. Remington and

I hope to build this planning process into the development of programs and projects across all agencies and communities, which are involved in the public health system in Iowa.

We must note, because farming has traditionally been a family business, that it is not just the professional farmer, it is the farm family that is at risk for injury.

Another major collaborative effort, the Iowa Center for Agricultural Safety and Health, ICASH, brings together key organizations concerned with agricultural health and safety. ICASH is a partnership of the University of Iowa, Iowa State University, the Iowa Department of Public Health, and the Iowa Department of Agriculture and Land Stewardship. Its mission is to coordinate the state's resources and to establish programs to improve the health and safety of farm families, farm workers, and the agricultural community.

Some exciting projects ICASH has undertaken include the following:

- 1. The expansion of the Iowa Agricultural Health and Safety Service Project to a statewide network of hospitals. This project provides comprehensive occupational health and safety services.
- 2. The development of an illness and injury prevention program for livestock confinement operators.
- 3. A health and safety program for school classrooms and rural youth groups.

- 4. Sponsorship of a community-based project to increase awareness of farm machinery hazards.
- 5. The dissemination of information collected by the statewide agricultural injury surveillance program.

Another collaborative effort is Work Safe Iowa. Work Safe Iowa has established an occupational medicine and associate program at the University of Iowa with the goal of promoting occupational safety and health through education and consultation. The program was designed to assist community hospitals in implementing and strengthening their occupational medicine clinics and related outreach services. In addition, the community hospitals serve as a vehicle to integrate Work Safe Iowa services into local communities.

The Iowa Center for Rural Health and its advisory committee represent another collaborative effort. The Center for Rural Health, located within the Office of Health Planning at the Iowa Department of Public Health, acts as a focal point for the state's efforts in preserving quality health care in Iowa's rural areas. The Center and its broadbased advisory committee strive to identify health needs, build rural coalitions, provide technical assistance to rural areas, administer grants for rural projects, and act as an advocate and information resource with respect to rural health issues.

The Occupational Health and Safety Nurses Program at the Iowa Department of Public Health is the tie between the state and the communities. This program builds on existing rural health programs and links the Health Department to rural health areas.

#### **Opening Remarks**

Yet another community-based program is the Farm Family Risk Assessment and Education Program that is targeted at farm youth. It includes a farm family "safetywalkabout" training program where families learn to recognize existing farm hazards and receive assistance in changing the farm workplace into a safe environment.

Finally, we know that if all prevention interventions have failed, we must turn to Emergency Medical Services (EMS). In Iowa, EMS is a community-based program, and 75 percent of the medical providers are volunteers.

Medical treatment begins at the scene of an injury or illness and can make the critical difference between life and death. EMS has become an even more critical issue to rural Iowa over the last decade, as our population has aged and access to health care has become a pressing concern. In the movie Field of Dreams, Iowa was memorialized when someone asked the hero, "Is this heaven?" and the hero responds, "No, this is Iowa." You and I know that Iowa is not heaven; it is close, but it is not heaven, as our agricultural injury and fatality numbers certainly prove. That is why we must work toward making Iowa and the nation a safe and healthy place to live and work.

Remember, even in the movie *Field of Dreams*, an injury to a farm family member was almost a tragedy. Helping prevent those injuries is our goal and our challenge at this conference.

Once again, on behalf of Governor Branstad and the people of Iowa, welcome to Des Moines and to this conference and to this opportunity to move preventable injury programming out of the big cities and into rural America.